



# TOWN OF LOS GATOS

## STUDENT COMMISSIONER APPLICATION

Community Services Commission, Parks Commission, Youth Commission

Submit to: Clerk Department  
110 East Main Street, P.O. Box 949, Los Gatos, CA 95031  
Telephone: (408) 354-6834 • Fax: (408) 354-8431 • Email: [clerk@losgatosca.gov](mailto:clerk@losgatosca.gov)

**Please type or print legibly**

Last Name: _____	First Name: _____
Address: _____	City: _____ Zip: _____
Home Phone: _____	Work Phone: _____
Email: _____	Fax: _____
Present School: _____	School Attending in Fall: _____
Length of Residency in Los Gatos: _____	Grade Level in Fall: _____

Student Government Experience	Position/Office Held	School Year
Service Clubs or Organizations You Have Belonged To	Position/Office Held	School Year
Commission(s) Applying To	List Commissions in Preferred Order or Indicate "No Preference"	
<input type="checkbox"/> Community Services (must be in grade 10, 11, or 12 in fall)	1. _____	
<input type="checkbox"/> Parks Commission (must be in grade 10, 11, or 12 in fall)	2. _____	
<input type="checkbox"/> Youth Commission (must be in grade 8, 9, 10, 11, or 12 in fall)	3. _____	

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Commissions Applying To: \_\_\_\_\_

1. Why are you interested in serving as a Student Commissioner? \_\_\_\_\_

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2. Tell us about your skills, experience or interests that you feel would assist us in considering your application. \_\_\_\_\_

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3. Please list your current commitments. \_\_\_\_\_

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4. How many weekday hours per month would you be able to commit to as a Student Commissioner?

Please circle one or fill in "other."

1-3 hours      4-6 hours      7-9 hours      10+ hours      Other \_\_\_\_\_

5. What do you see as important issues for the youth in Los Gatos? \_\_\_\_\_

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6. What specifically would you contribute to the Commissions you are interested in? \_\_\_\_\_

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